

## AUTHORIZATION AGREEMENT FOR AUTOMATIC WITHDRAWAL OF FUNDS

Type of Authorization:	<input type="checkbox"/> New authorization <input type="checkbox"/> Change donation amount <input type="checkbox"/> Change donation date <input type="checkbox"/> Change banking information <input type="checkbox"/> Discontinue electronic donation
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Last Name	First Name	
Address		
City	State	Zip
Email Address:		

<b>CHECKING / SAVINGS</b>	Please debit my contribution from my (check one): <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> <input type="checkbox"/> Savings Account (contact your financial institution for Routing #)  <input type="checkbox"/> Checking Account (staple a voided check below)         </div> <div>           Routing Number: _____  <i>Valid Routing # must start with 0, 1, 2, or 3</i>            Account Number: _____            Bank Name: _____         </div> </div> <div style="margin-top: 10px;"> </div>
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<b>Date of first contribution:</b> ____/____/____	<b>Frequency of contribution:</b> (please check only one) <ul style="list-style-type: none"> <li><input type="checkbox"/> Weekly - Mondays</li> <li><input type="checkbox"/> Weekly - Fridays</li> <li><input type="checkbox"/> Semi-Monthly on the 1<sup>st</sup> &amp; 15<sup>th</sup></li> <li><input type="checkbox"/> Monthly on the 1<sup>st</sup></li> <li><input type="checkbox"/> Monthly on the 15<sup>th</sup></li> </ul>	<b>FUNDS AND AMOUNTS</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> General Fund \$ _____</li> <li><input type="checkbox"/> Missions \$ _____</li> <li><input type="checkbox"/> Matthew 25 Fund \$ _____</li> <li><input type="checkbox"/> Building Repair Fund \$ _____</li> </ul>
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**AGREEMENT**  
 I (we) hereby authorize Grace Lutheran Church to initiate debit entries to my (our) account indicated above at the financial institution named above. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY:** ENVELOPE #: \_\_\_\_\_ DATE ENTERED: \_\_\_\_\_

Please attach a voided check here: